

## DEPARTMENT OF THE ARMY

## US ARMY INSTALLATION MANAGEMENT COMMAND HEADQUARTERS, US ARMY GARRISON FORT A.P. HILL 18436 4<sup>TH</sup> STREET FORT A.P. HILL, VIRGINIA 22427-3114

IMPH-ESF

ATTENTION OF

28 February 2013

## MEMORANDUM FOR SEE DISTRIBUTATION

SUBJECT: Commander's Policy Statement #27, Automatic External Defibrillator (AED) Program

- 1. Applicability. This policy applies to all Fort A.P. Hill (FAPH) personnel and Tenant Organizations situated on the installation.
- 2. Proponent. FAPH Directorate of Emergency Services.
- 3. References.
- a. AR 40-3 Medical, Dental, and Veterinary Care, 22 February 2008 (RAR:12 March 2010).
  - b. APR 385-10, Safety and Occupational Health Program, 19 April 2007.
- 4. Purpose. Provide guidance on purchasing, maintaining and using Automated External Defibrillators (AED) on the installation as outlined in AR 40-3, FAPH 385-10 and the policy.
- 5. General. Title 42 USC 238p requires the Secretary of Health and Human Services to establish guidelines with respect to placing AEDs in Federal buildings. These guidelines are available at the Department of Health and Human Services web site: <a href="http://www.foh.dhhs.gov/public/whatwedo/AED/HHSAED.asp">http://www.foh.dhhs.gov/public/whatwedo/AED/HHSAED.asp</a> Under the provision of DODI 6055.06, the Secretary of the Army is responsible for executing emergency services programs on Army installations.
- 6. Installation policies allow for activities to be conducted in accordance with statutory and regulatory requirements to ensure legal, safe, and efficient conduct of operations and training activities on FAPH.
- 7. Procurement Procedures. Individuals or organizations that purchase an AED for use on the FAPH Installation will follow these procedures.
- a. In an effort to maintain standardization within the FAPH community, all AED purchase requests will be evaluated by the FAPH Fire & Emergency Services

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(F&ES) Fire Chief prior to purchase. The intent is to assure all AED's are compatible with the FAPH F&ES equipment currently provided for Emergency Care, which will facilitate a better record keeping of events and smoother, quicker changeover of equipment for Emergency Care Providers upon their arrival on scene.

- b. Requesting individual/organization that will manage the AED program.
- (1) Contact the Directorate of Emergency Services before purchasing an AED and designate an individual in the organization that will manage the AED program.
- (2) Will assign two individuals per facility to procure and maintain American Heart, Heart Saver AED Certification or American Red Cross, CPR?AED Certification. The FAPH F&ES will provide instructors when available. If one of the appointed individuals leaves the organization at anytime, another one with the same certification must be appointed. This will ensure that the organization maintains two CPR/AED qualified individuals at all times.
- (3) Will report to the FAPH F&ES POC on a monthly basis the status of the AED(s) with-in their organization. This report will ensure that the AED's are maintained in working order. The preferred method for this reporting is through e-mail communications.
- 8. Use of an AED for Medical Emergency.
- a. The assigned AED will be utilized according to the manufacture's requirements, recommendation and the manner in which the user was trained.
- b. After the use of an AED at any unit, activity, or facility, the local program manager will remove that AED from use and contact the Installation Safety Office (ISO) who will contact the Physician Subject Manner Expert (SME).
- c. The local program administrator will provide information in a written format of the details of the incident and temporarily sign the AED over to the ISO who will provide those details to the Physicians SME for electronic evaluation of the data.
- d. The Physician SME will conduct an assessment of the AED system performance, including review of the AED data and the electrocardiograph tracing of the victim.
- e. The Physician SME will provide an After-Action Report (AAR) to the unit or activity, ISO, Director DES, and the Garrison Commander for review and/or process improvements.

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9. Point of contact for this policy is Ann E. Moore at (804) 633-8252 or e-mail at ann.e.moore@us.army.mil.

PETER E. DARGLE

LTC, AR Commanding

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